File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Reset Form

CAMPAIGHT THE ANDS

510 E. 12 ^m , Ste. 1A				"D" MALUSYME bL.
Des Moines, Iowa 50319 Fax: 515-281-4073		NS, SEE BACK OF FORM	2000	1111 1-
	DISCLOSURE	SUMMARY PAGE	£000	JUL 17 AM11:29
COMMITTEE NAME (Must be sa	me as on Statement of Orga	nnization)		
Bindner S	or Superviso	R	1 1	FORM
IMPORTANT: Indicate by # type of or	ommittee you are reporting for			DR-2 DISCLOSURE
(1) Statewide/Legislative/Judge Stand (4) County Central Committee (5) Co	ding for Retention Candidate / 2	2)State BAC / 2)State Dont.	. (R	ev. 07/2007) REPORT
Subdivision Candidate (8)County P/	AC (9) City PAC (10) School E	date (/)School Board or Other Polit Board or Other Political Subdivision P	AC (For	Office Use Only
11) Local Ballot Issue				mm. #
CANDIDATE COMMITTEES ON Candidate Name	LY:	Delition Control of a series		ged in
Linda Bindne	3,4	Political Party (if applicable	~~	nned
		District (if Senate or House	_	mputer
Office Sought County S	weervisor	District (II Sensite of House	Auc	lited
3	0		=	
ate reports are subject to possible o	ivil and criminal penalties. Pur	rsuant to Iowa Code sections 688.3	12A(7) and 68A	401(3), the candidate, for a
				• • •
Linda Binane		712-376-257	1	
IGNATURE OF PERSON FILING	REPORT	TELEPHONE	·	DATE SIGNED
AM FILINGA July	19, 2008	REPORT FOR (1) ELECTION	N /(2)NON-E	LECTION YEAR.
(report	date)	Indicate t	y# 🚺	
ICHECK IF AMENDMENT TO R	EPORT DATED		Lacal Carre	Manager Polar of File Name
•			Local Comm	ittees, enter Date of Election
Check if this is final (termination) report and attach Notice of reports until a DR-3 is filed.)	Dissolution Form DR-3.	County & Lor	cal Committees, enter County in
(For must continue to the	reports until a DK-3 is filed.))	which Electic	n is held
				ierokie_
STATEMEN'	TOF CASH ON HAND			
ASH ON HAND at the beginning	of the reporting period. (Total	al of all funds held by the		
committee. This amount	MUST be the same as the ca	ash on hand at the end		110.00
		st report filed.)	\$	110.00
ADD TOTAL MONEY TA				
	and the state of t	le A) (*also see in-kind below)	the state of the s	100.00
		7		337.98
	The state of the s	th Schedule H)		0
(Schedule H app	olies to Candidates' Commi		i .	
		SUB-TOTAL	\$	547.98
	IEY SPENT THIS PERIOD			
Schedule B: Expenditure:	s total (Attach Schedule B) (*	"also see debts and loans below	·)	544.48
Schedule F: Loan Repay	nents total (Attach Schedule	F)		
ASH ON HAND at the end of this	reporting period (if final repo	rt balance must be zero\	•	0
UNPAID BILLS (From Schedule I				
KIND CONTRIBUTIONS (From	4 4	•	•	107.00
OUTSTANDING LOANS (From S		eF)		487.98
ONSULTANT BREAKDOWN (Sc				YES X NO
ANDIDATE COMMITTEES ONLY				
LUE OF CAMPAIGN PROPERT			\$	Ø
'ATE COMMITTEES: Submit a re	sconciled campaign account	bank statement in January of ea	ch vear.	•

For instructions, See Back of Form CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Bindney for Supervisor.

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS O	OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISEF INCOMI
5/23/08	CK# 9018	Rosatio Maile 129 480×15+ Marcus, FA	s 510 35	none	\$ 100 00	
	ID# CK#					
	ID# CK#				·	
	ID# CK#					
	ID# CK#					
	ID# CK#					
	ID#					
	ID# CK#					
	ID# CK#					
	ID# CK#					
				SUB-TOTAL	\$ 100.00	
		es to displace the relationship of any	TOTAL (If last page	of this schedule)	\$ /00.00	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 FOR INSTRUCTIONS, SEE BACK OF FORM

•	-
Reset	Form

SCHEDULE (Rev. 07/03)

MONETARY **EXPENDITURES**

CHECK THIS BOX IF AMENDING FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/15/08	ID# CK# 2002	Wasne Printing 3112. Main Cherokee	Posters Buginess cards	\$ 103.35
5/27/08	ID# CK# 2044	Wayne Printing	Postere, litterbags	\$ 243.30
5/21/08	ID# CK# <i>2005</i>	Dring Wear It	Tshut	\$ 20.65
5/30/08	ID# CK# 2006	K. Mart	Mise. Supplies	9.58
5/30/08	ID# CK# 2007	Denny Hecton Signs	Dign materials	21.40
5/22/08	ID# CK# 2003	Marcies News	Advertising	36.00
5/23/08		Linda Bindner	Holmerting hell to Diseased card	113.70
	ID# CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iternized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

(for Schedule B)

Tom Bindner

	cuisor	1	(Rev. 06/97)	IN-KIND CONTRIBUTIONS
Bindner for Super		Reset Form	CHECK 1	THIS BOX IF NG FORM
DATE RECEIVED NAME AND ADDRESS (MM/DD/YR) OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
4/4/08 Loan to self		9	15.0.00	
4/4/08 Loan to self			200.00	
5/30/08 Loan to self 7-17-08 Loan to self	·		75.00	
7-17-08 Loan to self			62.98	
		: 	: .	
Loansmajer				
				::
		SUB-TOTAL TOTAL (if last page of this schedule)	\$ 487.98 487.98	

Bine		Statement of Organization) Super Ui Sor	RESET	F LOA (Rev. 02/08) RECE & REP
E; This sched	ule reports money loan	ed to the committee which is deposited in the PORTING PERIOD \$		CHECK THIS BO
TI - MONET/ (Original	ARY LOAMS RECEIVE source of loan, such as	D THIS REPORTING PERIOD a bank, must be shown if a third party is in	volved. Include loans from candid	late's personal funds.)
DATE RECEIVED (MM/DD/YR)	NAME (Include	AND ADDRESS OF LENDER Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
5-1L 08	Linda Bi 5838 D Marcus		suf	200.00
5-30·08	15.10.72		suf	75.00
7-17-08	Linda	Sindner	Sulf	62.98
· ·				
(Loans n	orgiven must be reporte	NTS MADE <u>THIS</u> REPORTING PERIOD d on Schedule E – In-kind Contributions.)	TOTAL (PART I)	s <u>337.98</u>
DATE PAID MM/DD/YR)	NAME (include	AND ADDRESS OF LENDER Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
	none			
				1